

THOMAS L. GARTHWAITE, M.D. Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES 313 N. Figueroa, Los Angeles, CA 90012 (213) 240-8101

September 21, 2005

TO:

Each Supervisor

FROM:

Thomas L. Garthwaite, M.D.

Director and Chief Medical Officer

SUBJECT:

OBSTETRICS AND PEDIATRIC PATIENTS AT KING/DREW MEDICAL

**CENTER (KDMC)** 

This is to provide additional information regarding my recommendations on the future of KDMC, as outlined in my August 5, 2005 memo. Specifically, it provides interview results and data on the patients currently using services that are recommended for closure, and data on the availability of these services elsewhere in the community.

#### Births at King/Drew Medical Center

The California Birth Registry Datafile provides information on mothers and their deliveries for hospitals throughout the state. These data show that among the 21,118 women residing in Service Planning Area 6 (SPA 6) who gave birth during 2004, only 2.5% went to KDMC for their delivery. This percentage is similar to the overall percentage of women in LA County giving birth at any DHS facility.

The 2004 data for KDMC indicate that 609 women gave birth at King/Drew, 13 of whom had twins. Ninety-two percent of the mothers were 18 years or older; the median age was 26. Nearly all of the mothers were Latina (321) or Black (272). Ninety three percent of the women were insured through Medi-Cal.

Fewer than half of the mothers had completed high school and one-third had nine or fewer years of education. A majority of the mothers were born in either the United States (321) or Mexico (200). An additional 61 were born in other Latin American countries, and 14 were born in African countries. Nearly all the mothers reported their occupation as either homemaker (90%) or student (7%).

Gloria Molina

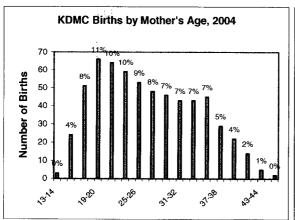
First District

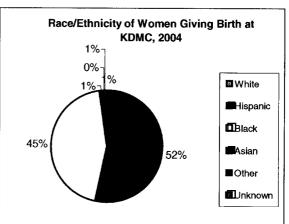
Yvonne Brathwaite Burke Second District

> Zev Yaroslavsky Third District

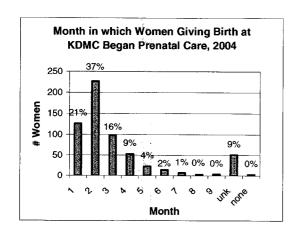
Don Knabe Fourth District

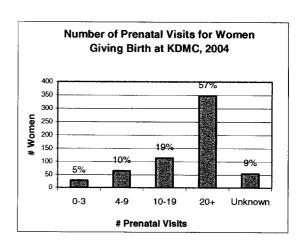
Michael D. Antonovich Fifth District





Despite low levels of educational attainment, the majority (75%) began prenatal care during the first trimester, with an additional 15% beginning care during the second trimester. The majority (57%) had 20 or more prenatal visits while three quarters (76%) had ten or more prenatal visits. Only three mothers (1%) reported receiving no prenatal care whatsoever, although data were missing for 9% of the women. Nearly one-quarter (23%) of babies born at KDMC had low birth weight (less than 2,500 grams), which is significantly higher than the percentage of low birthweight among all SPA 6 babies during the same year (8%).





The average distance traveled was 4.8 miles from home to hospital. This compares to an average of 5.0 miles traveled by all SPA 6 women to the hospital where they gave birth. About 25% of the women were transported to the hospital via ambulance. The ZIP codes of residence for women giving birth at KDMC is shown in Attachment I.

## **Giving Birth at KDMC: Interview Results**

While the Birth Registry provides reliable statistics on mothers and babies, the numbers cannot substitute for human interactions and understanding individual motivations. To provide a human face to the data, we took a "snapshot" of new mothers and women being seen in prenatal clinics. Nurses from the DHS Quality Improvement Program interviewed a convenience sample of women who had recently delivered at KDMC (7) and women currently in prenatal care at KDMC or Humphrey CHC (17) during the week of August 29, 2005. Questions focused on their choice of delivery hospital, insurance status, and other health services quality assurance issues.

#### **New mothers**

We interviewed seven women ranging in age from 20 to 35 years old (median age was 29). Five of the seven new mothers were Latina and two were African American. Five of the women enrolled in Medi-Cal (two reported they had Emergency Medi-Cal). The other two used the County's pre-pay program for prenatal, labor and delivery expenses. One of the Latinas told interviewers she had traveled from Mexico during her eighth month of pregnancy. We did not ask patients directly about their immigration status, but it is likely that some were undocumented. Two of the women arrived for their birth via ambulance, and were brought to KDMC because they were in active labor and it was the closest hospital. One woman gave birth in the ambulance. Among the five non-ambulance arrivals, two said they chose KDMC because of location, two were referred from County clinics for induced labor, and one had been satisfied with a previous delivery at KDMC.

#### **Expectant mothers**

Approximately 1,000 women had one or more visits to a prenatal clinic at KDMC or Humphrey Comprehensive Health Center. We interviewed 17 expectant mothers receiving prenatal care at KDMC (14) and Humphrey (3). Their median age was 28; one interviewee was a 17-year-old minor. Of those 17, 12 were Latina, four were African American, and one was Filipino. Seven of the women were likely undocumented, given that they were on Emergency Medi-Cal. Another three were foreign-born and said they had applied for Medi-Cal, but didn't know what kind. Three expectant mothers, including two at Humphrey, gave location as their primary reason for choosing County facilities for their prenatal care; two others mentioned KDMC's commitment to low-income patients. Five women were referred to the KDMC clinic because of high-risk status detected at various other clinics (and, in one case, KDMC's emergency room). Twelve of the expectant mothers said they plan to have their babies at KDMC; three named other local hospitals and two did not yet have a plan. Nine of the 15 women who gave ZIP code information are currently traveling six miles or more to prenatal clinic; four of these are traveling between nine and 12 miles.

#### **Pediatric Inpatients**

KDMC provided five percent of the hospitalizations among children living in SPA 6 during 2004, while another six percent were provided by other DHS hospitals. A total of 1,119 KDMC hospitalizations were children under age 18, for an average daily census in Pediatrics of 14.6 (including the Pediatric Intensive Care Unit). Nearly all (93%) of these patients were insured. The most common reasons for hospitalization were respiratory problems (including bronchitis, asthma, pneumonia, and pleurisy), gastro-intestinal problems (including diarrhea and appendicitis), and cellulitis (skin infections). The residence locations of pediatric inpatients are shown on the map in Attachment II.

#### **Capacity Assessment**

#### **Obstetrical Physician Services**

To assess the availability of physicians for obstetrical prenatal services, the Department of Health Services Quality Improvement Program (DHSQIP) staff called physicians who have admitting privileges at each of the hospitals mentioned above. These physicians (or their office managers) were asked whether their current practice could accommodate one to two new obstetrical patients per month and whether their practice accepted high-risk patients and Medi-Cal funding.

A total of 72 obstetricians were contacted. Of these, 70 (97%) responded that they were accepting Medi-Cal patients, and could accommodate one to two new patients per month. Thirty-nine of these also responded that they were willing to take high-risk patients. These results indicate that there is capacity for 840 to 1,680 prenatal patients annually, including 468 to 936 high-risk patients. The locations of these providers are shown on the map in Attachment III.

#### **Hospital-based Obstetrical Services**

DHSQIP staff called the Chief Executive Officers (CEO) of neighboring hospitals providing obstetrical services during the last two weeks of August 2005 and the first two weeks of September 2005. The CEOs were asked questions about their current capacity for obstetrical services and their ability to provide inpatient hospital delivery services for an additional one to two deliveries per month. Six non-County hospital CEOs responded and two Los Angeles County hospital CEO's responded from the following hospitals: California Hospital Medical Center, Centinela Hospital Medical Center, Daniel Freeman Memorial Hospital, Harbor UCLA Medical Center, LAC+USC Medical Center, Bellflower Medical Center, Community and Mission Hospital, and St. Francis Medical Center. All eight hospitals CEOs confirmed their ability to handle additional deliveries per month.

Concerns have been raised regarding ethical directives at Catholic-owned hospitals that restrict some services that are typically provided in hospital obstetrics departments. Elective abortions are rarely performed at KDMC. However, tubal ligation procedures were provided immediately after birth to 8% of the women delivering at KDMC during 2004, so we asked hospital CEOs if their facilities provide these services. Seven of the eight hospitals affirmed their ability to provide tubal ligations.

Hospital	Deliveries per Month	Can handle additional deliveries?	Tubal Ligation?
California	400	Y	Y
Centinela	184	Y	Y
D. Freeman Memorial	140	Y	Y
Harbor-UCLA	87	Y	Y
LAC+USC	120	Y	Y
Bellflower	100	Y	Y
Comm. & Mission	150-170	Y	Y
St. Francis	550-600	Y	N

#### **Neonatal Intensive Care**

These same CEOs were asked to provide information on their Neonatal Intensive Care Unit (NICU) capacity. Of the eight hospitals contacted, six confirmed their ability to provide NICU services, including California Hospital Medical Center, Daniel Freeman Memorial Hospital, Centinela Medical Center, and St. Francis Medical Center. These four non-County hospitals have a total of 11 to 13 additional NICU beds available. Additionally, the two Los Angeles County hospitals, Harbor-UCLA and LAC+USC Medical Centers can staff up to an additional 37 NICU beds. This provides a combined capacity of 48 to 50 additional NICU beds. KDMC's average daily NICU census during the past two years has ranged from 10 to 14.

Hospital	Licensed NICU Beds	NICU ADC	Available Beds	NICU Level
California	9	7	2	II
D. Freeman Memorial	13	11	2	II
Centinela	9	7	2	II
Harbor-UCLA	18	7	11	III
LAC+USC	48	22	26	III
St. Francis	29	22 - 24	5 - 7	II

#### **Inpatient Pediatrics**

The CEOs were also queried on their ability to manage an increased inpatient pediatric population. Five of the non-County hospitals provide pediatric inpatient services, including: California Hospital Medical Center, Daniel Freeman Memorial Hospital, Bellflower Medical Center, Community and Mission Hospital, and St. Francis Medical Center. The other County hospitals also provide pediatric inpatient services, including LAC+USC and Harbor-UCLA Medical Centers. These seven hospitals have the physical space to accommodate a range of 151 to161 additional pediatric patients. KDMC's average pediatric bed utilization has ranged from 12 to 17 during 2004. The two County facilities can also accommodate pediatric intensive care unit (PICU) patients. One of the non-County facilities (Bellflower) is planning to open a PICU as part of an overall expansion of pediatric services. KDMC's average PICU utilization ranged from two to four beds during 2004.

Hospital	Licensed Pediatric Beds	Pediatric ADC (fluctuates seasonally)	Available Beds	PICU
California	26	7-8	18-19	No
D. Freeman Memorial	19	8	11	No
Harbor-UCLA	34	25	9	Yes
LAC+USC*	135	39	96	Yes
Bellflower	7	2	5	No
Comm. & Mission	21	8-13	8-13	No
St. Francis	14	6-10	4-8	No

<sup>\*</sup> Fewer Pediatric beds will be available in the LAC+USC replacement hospital currently under construction.

## **Conclusions**

- KDMC provides a very small share of obstetrics and pediatric services to residents of SPA 6.
- Obstetrical patients still seeking care at KDMC tend to be high risk and are more likely to give birth to babies that are low birthweight and premature. However, pediatric patients at hospitalized KDMC typically have similar conditions to other hospitalized pediatric patients in Los Angeles County.
- There is adequate capacity and expertise in SPA 6 and the surrounding areas to accommodate the obstetrics and inpatient pediatric patients currently being seen at KDMC.

If you have any questions or need additional information, please let me know.

TLG:BC:id

Attachments

c: Chief Administrative Office County Counsel Executive Officer, Board of Supervisors

# **KDMC Births by Mother's ZIP Code**

ZIP Code	Number of Births by ZIP Code
90003	90
90059	78
90002	63
90044	54
90001	43
90011	38
90222	29
90220	27
90221	26
90061	22
90262	20
90037	16
90047	16
90280	7
90250	6
90004	5
90016	5
90062	4
90201	4
90006	3
90019	3
90043	3
90247	3
90301	3
90746	3
90805	3
90005	2
90008	2
90018	4 3 3 3 3 3 3 2 2 2 2 2 2 2
90020	2
90034	2
90058	2
90305	2
90706	2
90723	
Other*	30
Total**	622

<sup>\*</sup>Other ZIP codes containing one birth mother each.

Source: Automated Vital Statistic System (AVSS), 2004.

<sup>\*\*</sup>Note: A total of 609 mothers gave birth to 622 babies.

King Drew Medical Center Pediatric Patients (0-17 years) PACIFIC ALLIANCE MEDICAL CENTER, INC. LAC+USC MEDICAL CENTER GOOD SAMARITAN HOSPITAL-LOS ANGELES WHITE MEMORIAL MEDICAL CENTER CALIFORNIA HOSPITAL MEDICAL CENTER - LOS ANGELES LOS ANGELES METROPOLITAN MC EAST LOS ANGELES DOC LOS ANGELES COMMUNIT CITY OF COMMERCE COMMUNITY AND MISSION HSP OF HNTG DANIEL FREEMAN MEMORIA NGLEWOOD MEMORIAL HOSPITAL OF GARDENA SUBURBAN I LAWNDALE **LEGEND** BELLFLOWER MO = 1 KDMC PED Patient **DHS Hospital** miles Freeway **SPA** Boundaries LITTLE COMPANY OF MARY HOSPITAL LOS ANGELES CO HARBOR-UCLA MEDICAL CENTER WILMINGTON ■ TORRANCE MEMORIAL MEDICAL CENTER

**Attachment III** 

# Obstetricians Accepting New Medi-Cal Patients and High Risk Medi-Cal Patients

